

Application Data Sheet

Application Information

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?:

Computer Readable Form
(CRF)?:: No

Number of copies of CRF::

Title:: PHARMACEUTICAL COMPOSITIONS HAVING A MODIFIED
VEHICLE

Attorney Docket Number:: 01068.US1

Request for Early
Publication?: No

Request for
Non-Publication?: No

Suggested Drawing Figure::

Total Drawing Sheets:: 2

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Czech
Status::	Full Capacity
Given Name::	Ondrej
Middle Name::	
Family Name::	Hendl
Name Suffix::	
City of Residence::	Portage
State or Province of Residence::	Michigan
Country of Residence::	USA
Street of mailing address::	7541 Woodcrest Road
City of mailing address::	Portage
State or Province of mailing address::	Michigan
Country of mailing address::	USA
Postal or Zip Code of mailing address::	49024
Applicant Authority Type::	Inventor
Primary Citizenship Country::	USA
Status::	Full Capacity
Given Name::	Susan
Middle Name::	M.
Family Name::	Machkovech
Name Suffix::	
City of Residence::	Mattawan
State or Province of Residence::	Michigan
Country of Residence::	USA
Street of mailing address::	10557 West P Avenue
City of mailing address::	Mattawan
State or Province of mailing address::	Michigan
Country of mailing address::	USA
Postal or Zip Code of mailing address::	49071

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Applicant Authority Type::	Inventor
Primary Citizenship Country::	USA
Status::	Full Capacity
Given Name::	Niki
Middle Name::	A.
Family Name::	Waldron
Name Suffix::	
City of Residence::	Kalamazoo
State or Province of Residence::	Michigan
Country of Residence::	USA
Street of mailing address::	2460 Wildemere
City of mailing address::	Kalamazoo
State or Province of mailing address::	Michigan
Country of mailing address::	USA
Postal or Zip Code of mailing address::	49009
Applicant Authority Type::	Inventor
Primary Citizenship Country::	USA
Status::	Full Capacity
Given Name::	Nancy
Middle Name::	J.
Family Name::	Britten
Name Suffix::	
City of Residence::	Portage
State or Province of Residence::	Michigan
Country of Residence::	USA
Street of mailing address::	4750 Norfolk Circle
City of mailing address::	Portage
State or Province of mailing address::	Michigan
Country of mailing address::	USA
Postal or Zip Code of mailing address::	49024



Applicant Authority Type::	Inventor
Primary Citizenship Country::	USA
Status::	Full Capacity
Given Name::	Dannette
Middle Name::	M.
Family Name::	Shaw
Name Suffix::	
City of Residence::	Hopkins
State or Province of Residence::	Michigan
Country of Residence::	USA
Street of mailing address::	420 West Main
City of mailing address::	Hopkins
State or Province of mailing address::	Michigan
Country of mailing address::	USA
Postal or Zip Code of mailing address::	49328
Applicant Authority Type::	Inventor
Primary Citizenship Country::	USA
Status::	Full Capacity
Given Name::	Alanta
Middle Name::	Lea
Family Name::	Lary
Name Suffix::	
City of Residence::	Kalamazoo
State or Province of Residence::	Michigan
Country of Residence::	USA
Street of mailing address::	4017 Lakeside Drive
City of mailing address::	Kalamazoo
State or Province of mailing address::	Michigan
Country of mailing address::	USA
Postal or Zip Code of mailing address::	49008

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Applicant Authority Type::	Inventor
Primary Citizenship Country::	USA
Status::	Full Capacity
Given Name::	Thomas
Middle Name::	J.
Family Name::	Yellig
Name Suffix::	
City of Residence::	Gobles
State or Province of Residence::	Michigan
Country of Residence::	USA
Street of mailing address::	25301 6th Avenue
City of mailing address::	Gobles
State or Province of mailing address::	Michigan
Country of mailing address::	USA
Postal or Zip Code of mailing address::	49055
Applicant Authority Type::	
Primary Citizenship Country::	
Status::	
Given Name::	
Middle Name::	
Family Name::	
Name Suffix::	
City of Residence::	
State or Province of Residence::	
Country of Residence::	
Street of mailing address::	
City of mailing address::	
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	

Correspondence Information

Correspondence Customer Number:: 25533
Name:: Pharmacia & Upjohn Company
Street of mailing address:: Global Intellectual Property
301 Henrietta Street
City of mailing address:: Kalamazoo
State or Province of mailing address:: MI
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 49007
Phone number:: (269) 833-9500
Fax Number:: (269) 833 2316
E-Mail address::

